

1.) CORPORATION NAME:

DUE DATE: **3/31/2014****Metagenics, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1819137**

**PARACORP INCORPORATED
7288 HANOVER GREEN DRIVE
MECHANICSVILLE, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	4,250
PREFER	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 25 ENTERPRISE
SUITE 200

CITY/ST/ZIP: ALISO VIEJO, CA 92656

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MARY CHOWNING
TITLE: TREASURER
ADDRESS: 25 ENTERPRISE
SUITE 200
CITY/ST/ZIP/CO: ALISO VIEJO, CA 92656

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OFFICER

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DIRECTOR

NAME: FREDERICK HOWARD
TITLE: CEO
ADDRESS: 25 ENTERPRISE
SUITE 200
CITY/ST/ZIP/CO: ALISO VIEJO, CA 92656

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OFFICER

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DIRECTOR

NAME: PAUL E KONNEY
TITLE: SECRETARY
ADDRESS: 25 ENTERPRISE
SUITE 200
CITY/ST/ZIP/CO: ALISO VIEJO, CA 92656

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OFFICER

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DIRECTOR

NAME: JENNIFER PENCE
TITLE: ASST SECRETARY
ADDRESS: 25 ENTERPRISE
SUITE 200
CITY/ST/ZIP/CO: ALISO VIEJO, CA 92656

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OFFICER

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DIRECTOR

NAME: WILLIAM BAER
TITLE: DIRECTOR
ADDRESS: 2360 CASCADE LAKES CIRCLE SE
CITY/ST/ZIP/CO: GRAND RAPIDS, MI 49546

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OFFICER

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DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY BLAND DIRECTOR 9770 44TH AVE NW SUITE 100 GIG HARBOR, WA 98332	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER COLMAN DIRECTOR 7575 FULTON ST, EAST ADA, MI 49355	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY J KATKE DIRECTOR 6262 DAKOTA TRAI PROMONTORY PARK CITY, UT 84098	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joe Landstra DIRECTOR 7575 FULTON ST, EAST ADA, MI 49355	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM WEAVER DIRECTOR 7575 FULTON ST, EAST ADA, MI 49355	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELIZABETH WYATT DIRECTOR 181 SUMMIT AVENUE SUMMIT, NJ 07901	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD ZAHN DIRECTOR 10040 EAST HAPPY VALLEY ROAD #601 SCOTTSDALE, AZ 85255	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JENNIFER PENCE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JENNIFER PENCE, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	2/20/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			